BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 4423-0127 PUS.

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	(if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
Insert Title:	TRANSMISSION DEVICE	E OF LAMINATIN	G MACHINE			
,	the specifications of which is attached hereto. If and/or the following:	f not attached hereto, the app	lication is identified by the attorney	docket number as set forth ab	ove	
Fill in Appropriate	the specification was filed on			as		
Information -	United States Application Number	r		,		
For Use Without Specification Attached:	and amended on		(if applicable); and/or			
	the specification was filed on		as PCT			
	International Application Number		; and was			
	amended on			(if applicable)		
	I hereby state that I have reviewed and to by any amendment referred to above. I acknowledge the duty to disclose inform \$1.56. I do not know and do not believe the exthereof, or patented or described in any primarization, that the same was reapplication, that the invention has not been application in any country foreign to the Unmore than twelve months (six months for do not this invention has been filed in any country representatives or assigns, except as follows I hereby claim foreign priority benefit or inventor's certificate listed below and has a filing date before that of the application of Prior Foreign Application(s)	rmation which is material to same was ever known or unted publication in any counct in public use or on sale n patented or made the suited States of America on a esigns) prior to this applicantry foreign to the United vs. ts under Title 35, United State also identified below ar	sed in the United States of Ameriantry before my or our invention in the United States of American bject of an inventor's certificate an application filed by me or my lation, and that no application for States of America prior to this states Code, §119 (a)-(d) of any for y foreign application for patent	7, Code of Federal Regulation ica before my or our inventhereof or more than one ynore than one year prior to issued before the date of egal representatives or assipatent or inventor's certification by me or my leading application by for paor inventor's certificate has	ons, ation year this this igns cate egal	
Insert Priority	Prior Foreign Application(s)			Priority Clain	ned	
Information: (if appropriate)		· · · ·	(M. 1/15) (W. 571.)			
(п арргорпале)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No	j	
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	(Number)	(Country)	(Month / Day / Year Filed)	- Grand - Gran		
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	(Number)	(Country)	(Month / Day / Year Filed)	Yes No	ı	
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, Un	ited States Code, §119(e) of	f any United States provisional app	olication(s) listed below.		
(if any)	(Application Number)			(Filing Date)		
	(Application Number)	. "		(Filing Date)		
	All Foreign Applications, if any, for any Pethe Filing Date of this Application:	atent or Inventor's Certification	ate Filed more than 12 months (6 months for designs) Pric	r to	
Insert Requested Information: (if appropriate)	Country	App	lication Number E	Date of Filing (Month / Day / Year)		
	I hereby claim the benefit under Title 35, Unite part application(s) listed below and, insofar as t and/or PCT application in the manner provided information which is material to the patentabilifiling date of the prior application and the nation	he subject matter of each of t d by the first paragraph of Ti ity as defined in Title 37, Co	he claims of this application is not di itle 35. United States Code, §112, I de of Federal Regulations, §1.56 wh	sclosed in the prior United Stacknowledge the duty to disc	tates lose	

(Filing Date)

(Status - patented, pending, abandoned)

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(Application Number)

I hereby appoint the practitioners at CUSTOMER-NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292 P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMPLETE THE FOLLOWING: Pull Name of First or GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE Chin-Tsung HSIAO nt is Sign Residence (City, State & Courter) Taiwan(R.O.C.) Taipei Hsien, Taiwan(R.O.C.) MAILING ADDRESS (Complete Street Address including City, State & Country) No. 9, Wu-Chun 6 Rd., Wu-Ku Ind. Park, Taipei Hsien , Taiwan (R.O.C.) GIVEN NAME FAMILY NAME INVENTOR'S SICNATURE -DATE: Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Pull Name of Fourth GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE" Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Il Name of First GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE DATE Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Page 2 of 2 (Revised 01/02) DATE OF SIGNATURE